

**MULTIPLE DEPENDENT CLAIM  
FEE CALCULATION SHEET**

SERIAL NO. **10840016**

FILING DATE

APPLICANT(S)

**CLAIMS**

	AS FILED		AFTER 1ST AMENDMENT		AFTER 2ND AMENDMENT										
	IND	DEP	IND	DEP	IND	DEP		IND	DEP	IND	DEP	IND	DEP	IND	DEP
1	1						51		1						
2	1						52		1						
3		2					53		1						
4		1					54		1						
5		1					55		1						
6		2					56		1						
7		2					57		1						
8		2					58		1						
9		2					59		1						
10		2					60		1						
11		1					61	1							
12		1					62	1							
13		1					63		1						
14		2					64	1							
15		2					65		1						
16		2					66		1						
17	1						67	1							
18		1					68		1						
19		1					69		1						
20		1					70	1							
21		1					71	1							
22		1					72		11						
23		1					73		11						
24		1					74		1						
25		1					75		1						
26		1					76		11						
27	1						77								
28		1					78								
29		1					79								
30	1						80								
31		1					81								
32		1					82								
33		1					83								
34		1					84								
35	1						85								
36		1					86								
37		1					87								
38		1					88								
39		1					89								
40		1					90								
41		1					91								
42		1					92								
43		1					93								
44		1					94								
45		1					95								
46		1					96								
47		1					97								
48		1					98								
49		1					99								
50		1					100								
TOTAL IND.	↓		↓		↓		TOTAL IND.	12 ↓		↓		↓		↓	
TOTAL DEP.	←		←		←		TOTAL DEP.	103 ←		←		←		←	
TOTAL CLAIMS							TOTAL CLAIMS	115							